BEST AVAILABLE COPY

PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000													
CLAIMS AS FILED - PART I SMA (Column 1) (Column 2) TYP											OR_	other Small (
TOTAL CLAIMS			35					RAT	Έ	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC	FEE	355.00	OR	ASIC FEE	
TOTAL CHARGEABLE CLAIMS			35 minus 20=		• 15			XS:	9=		OR	X\$18=	270.
INDEPENDENT CLAIMS			minus 3 =		. 3			X40) <u> </u>		OR	X80=	240
MULTIPLE DEPENDENT CLAIM P			RESENT					+13	5=		OR	+270=	B
* If the difference in column 1 is less than zero, enter "0" in column 2											OR	TOTAL	1220
If the difference in country 1 is less than 2010, that													
(Column 1) (Column 2) (Column 3)									ALL E	NTITY	OR	SMALL	
		CLAIMS REMAINING		NUR	IEST BER	PRESENT	1	RA	TF	ADDI- TIONAL		RATE	ADDI- TIONAL
2		AFTER AMENOMENT			FOR	EXTRA	4			FEE			FEE
MENDMENTA	Total :	.39	Minus	-3	5	• 4	1	X\$	9=		OR	X\$18=	1
Z I	Independent	. (0	Minus	•••	0	= (4	X4	0=		OR	X80=	
<u>₹</u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						ل	+1	35=		OR	+270=	
	_	_						<u> </u>	TOTAL		OR	TOTA ADDIT, FE	
1	7-1905 ADDIT. FEE ADDIT. FEE												
宀	. ,	CLAIMS		HIC	HEST MBER	PRESENT	7			ADDI-	1		ADDI-
17 B		REMAINING AFTER		PRE	HOUSLY D FOR	EXTRA		R	ATE	TIONAL FEE	_[RATE	TIONAL FEE
AMENDMENT B	Total	AMENDMENT	Minus		39	=	٦	X	9=	•	OF	X\$18=	
ENC	Independent	. 6	Minus	***	6	=		×	40=		OF	X80=	
A	FIRST PRESE	NTATION OF A	AULTIPLE DEF	ENDE	NT CLAIM		لـ		35=		OF	+270=	
									TOTAL	-		101	AL
								ADD	IT. FEE			ADDIT. FI	EEL
		(Column 1)			lumn 2) GHEST	(Column	3)	_		ADDI-	7		ADDI-
O		REMAINING AFTER		PRE	UMBER VIOUSLY	PRESEN		R	ATE	TIONAL		RATE	
AMENDMENT C		AMENDMENT	Minus	P/	ID FOR	=	一	T _x	\$ 9=	T FEE	٦,	X\$18	1
	Total Independent	 . 	Minus			=		-	40=	1-		Ven	_
¥	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									+-	7	7	_
-									135=		_ 01	701	
	If the Winhard M	urnn t is less thei umber Previously	Paus For IN II	us orm	12 12 1440 G		.50.	ADD	TOTAL	<u> </u>	0	ADDIT. F	
	'il the "Highest Nu The "Highest Nu	umber Previously umber Previously mber Previously	Paid For IN TH Paid For (Total (iis SPAI or Indep	CE is tess t encient) is t	nan 3, enter ne highest m	umbe	t bund i	in the a	elsingorqq	ni xod	column 1.	
			•										T OF COMME

FORM PTO-671 (Res. MOD)